



PUBLIC DANCE HALL LICENSE INFORMATION

OFFICE OF THE CITY CLERK LICENSE DIVISION
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 EMAIL: LICENSE @MILWAUKEE.GOV

LICENSE PERIOD: Annual, July 1 to June 30

LICENSE FEE: \$125.00, **Must be submitted with application.** Checks payable to: City of Milwaukee.

APPLICATION: Complete, sign and return application to City Clerk License Division, City Hall, 200 E. Wells Street, Room 105, Milwaukee, WI 53202.

SIGNATURES: Notarized signatures of the individual, all partners, the agent and officers of a corporation or members of a LLC are required.

REQUIREMENTS: No public dance hall license shall be granted to any persons or agents of corporations or limited liability corporations who are not 21 years of age or older and residents of the state of Wisconsin.

FINGERPRINTS: All applicants (including all partners, all corporate officers, members and the agent) whose fingerprints are not on file with the Milwaukee Police Department must be fingerprinted. Report to the Police Administration Building, 951 N. James Lovell St. (7th St), Room 305, to be fingerprinted. If you are an out of town resident, call (414) 935-7281 to find out how to comply with the fingerprint requirement.

ADDITIONAL PERMITS/LICENSES:

A permit must be obtained from the City of Milwaukee Development Center, Permit Desk at 809 N. Broadway, 1st floor, (414) 286-8211.

Contact the Health Department, 841 N. Broadway, (414) 286-3674 to see if additional licenses are required. (Food licenses are issued by the Health Department.)

RESTRICTIONS: Closing hours in residential districts, 12:30 a.m. daily; business districts 1:00 a.m. weekdays and 1:30 a.m. on Saturdays and Sundays, and shall not reopen before 10:30 a.m. The chief of police, upon application made to the chief not less than 5 days prior to the holding of such public dance, may extend the closing.

An announcement shall be made 20 minutes prior to the beginning of curfew hours. All entertainment shall cease for a 20-minute period prior to curfew.

A public dance hall may not be leased or rented to the same club, society, etc. on more than 12 occasions in any calendar year.

GRANTING: After recommended approval by the Licenses Committee, licenses are granted by the Common Council at regularly scheduled meetings, which are usually held once a month. It generally takes about 5 to 6 weeks to process an application, provided you follow the above instructions in a timely manner. Please note that no meetings are held during the month of August.

REPORT CHANGES: Whenever any fact set forth in the application changes, the licensee shall file a written notice of the change with the License Division within 5 days after the change occurs.

PLEASE NOTE: *Any public dance halls which produce music by means other than prerecorded music are required to obtain a shows and exhibitions license pursuant to s. 84-40 of the Milwaukee Code of Ordinances.*



**City
of
Milwaukee**

PUBLIC DANCE HALL APPLICATION

OFFICE OF THE CITY CLERK LICENSE DIVISION
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 E-MAIL ADDRESS: LICENSE@MILWAUKEE.GOV

Any incomplete application or application submitted without the required fee will be returned.
Checks should be made payable to the City of Milwaukee. Return to above address.

Check one: ☐ Individual or ☐ Partnership (Fill out Section A, B, D & E)
☐ Corporation or LLC (Fill out Section B, C, D & E)

Section A	<u>INDIVIDUAL OR PARTNERSHIP:</u>			
	Full Name (Last, First & Middle Initial)		Full Name (Last, First & Middle Initial)	
	Home Address (include City, State, Zip Code):		Home Address (include City, State, Zip Code):	
	Home Phone Number: () -		Home Phone Number: () -	
	Length of Residency:		Length of Residency:	
Section B	Date of Birth:		Date of Birth:	
	<u>Business Name:</u>		Other license(s) held by applicant or attached to the premises:	
	Business Address (include City, State, Zip Code):			
	Building Owner Name:			
	Owner Home Address:		Home Phone Number:	
	Aldermanic District:	Business Phone Number: () -	Legal Occupancy of the Premises:	
	Hours of Operation:		Number of Off Street Parking Spaces available at the premises:	Number of patrons expected on a daily basis:
	Will sound amplification equipment be used? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe:			
	Security plan for the premises:			
	Plan to maintain orderly appearance and operation of the premises with respect to litter and noise:			
Section C	<u>Full Name of corporation or limited liability company:</u>			
	Address, if different from business address (include City, State, & Zip Code):			
	<i>Agent Or Local Manager:</i>			
	Full Name (Last, First & Middle Initial):		Home Phone Number: () -	
	Home Address (include City, State & Zip Code):			
Length of Residency:		Date of Birth:		

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Section C Continued	<i>President/Member</i>	<i>Vice President/Member</i>
	Full Name (Last, First & Middle Initial):	Full Name (Last, First & Middle Initial):
	Home Address (include City, State, Zip Code):	Home Address (include City, State, Zip Code):
	Home Phone Number: () -	Home Phone Number: () -
	Date of Birth:	Date of Birth:
	Length of Residency:	Length of Residency:
	<i>Secretary/Member</i>	<i>Treasurer/Member</i>
	Full Name (Last, First & Middle Initial):	Full Name (Last, First & Middle Initial):
Home Address (include City, State, Zip Code):	Home Address (include City, State, Zip Code):	
Home Phone Number: () -	Home Phone Number: () -	
Date of Birth:	Date of Birth:	
Length of Residency:	Length of Residency:	
Section D	Has anyone named on this application been convicted of violating any federal laws, state or local ordinances: <input type="checkbox"/> Yes <input type="checkbox"/> No; If yes, name person (s), date(s), charge(s) and penalties: _____ _____ _____	
	Has anyone named on this application been licensed to conduct a public dance hall in the city of Milwaukee? <input type="checkbox"/> Yes <input type="checkbox"/> No Location of such premises: _____ _____	
Section E	The undersigned agrees to inform the City Clerk within ten days of any substantial changes in the information supplied in this application. The undersigned shall not willfully refuse to provide the services offered under this license, or refuse to employ, or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry; and not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information. I have knowledge of the City Ordinances currently regulating the license applied for herein, and being duly sworn under oath, depose and say that I am the person named above and that all statements made in the foregoing application are true and correct.	
	SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ day of _____, 20____ _____ <div style="text-align: right;">Individual/Agent of Corp or LLC/Partner</div>	
	_____ _____ <div style="text-align: right;">President of Corp/Member of LLC/Partner</div>	
	Notary Public, State of Wisconsin _____ My commission expires _____ _____ <div style="text-align: right;">Secretary of Corp/Add'l Members/Partners</div>	

Office Use Only:

Initials: _____ Filed: _____ AD: _____ License #: _____ Granted: _____ Issued: _____